

DEPARTMENT OF BENEFIT PAYMENTS

744 P Street

Sacramento, CA 95814



October 29, 1974

ALL-COUNTY LETTER NO. 74-212

TO: ALL DISTRICT ATTORNEYS
ALL COUNTY WELFARE DIRECTORS

OBSOLETE

SUBJECT: WR 2.1 FORM REVISION

Superseded by ACL #77-15

REFERENCE:

Issued 3-17-77

The Department of Benefit Payments has initiated a task force to revise and update the WR form series. An important part of this series is, of course, the WR 2.1 Absent Parent Questionnaire.

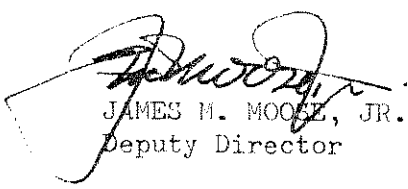
Several counties have indicated that the WR 2.1 is not adequate in its present format, and one of the objectives of this task force, therefore, will be to revise this form. We will attempt to make it as compatible with the needs of the district attorneys and family support personnel as possible. With this in mind, we are requesting input from concerned county agencies as to how the WR 2.1 can be improved. Only by obtaining information from persons actually using the WR forms within the counties can we make meaningful changes.

Suggestions, criticisms and comments regarding the matter should be forwarded to:

Jack Flanders
Department of Benefit Payments - Legal Affairs
744 P Street
Sacramento, Ca 95814

Because of the time constraints involved, it is requested that your responses be submitted to this department as soon as possible. This will allow our staff to fully evaluate your suggestions before acting upon them.

Sincerely,



JAMES H. MOOSE, JR.
Deputy Director

cc: CWDA